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UTILITY	Attorney Docket No.		000
PATENT APPLICATION TRANSMITTAL	First Inventor Impedance- Title Sznow A	Joseph R. Statter	
(Only for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label Ne	EF30466838548	ŀ
APPLICATION ELEMENTS	ADDRESS TO:	Assistant Commissioner for Patents  Box Patent Application	

(Only for new nonprovision	onal applications under 37 CFR 1.53(b)	Express Mail Label No. EF 304668385 US				
APPLICA	ATION ELEMENTS	ADDRESS TO: Assistant Commissioner for Patents  Box Patent Application				
See MPEP chapter 600 con	cerning utility patent application conten	to an area and a second manager when a second				
	Form (e.g., PTO/SB/17) a depticate for fee processing:	CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)				
Applicant claims	amali entity status.	8. Nucleotide and/or Amino Acid Sequence Submission				
See 37 CFR 1.27 Specification	Total Pages   3   1	(if applicable, all necessary)  Computer Readable Form (CRF)				
3 (preferred arrangement) - Descriptive filte	nt set forth below) e of the invention	b. Specification Sequence Listing on:				
- Cross Referen	ce to Related Applications	i. CD-ROM or CD-R (2 copies); or				
- Reference to sequence listing, a table,						
- Background of		c. Statements verifying identity of above copies				
- Brief Summery - Brief Description	y of the Invention on of the Drawings (If filed)	ACCOMPANYING APPLICATION PARTS				
- Detailed Descr		9. Assignment Papers (cover sheet & document(s))				
- Claim(s) - Abstract of the	Disclosure	10. 37 CFR 3.73(b) Statement Power of Attorney				
4 5 Drawing(s) (35 t	J.S.C. 113) [ Total Sheets 2	1 11. English Translation Document (if applicable)				
5. Oath or Declaration	[Total Pages 2	12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations				
a. V Newty exec	cuted (original or copy)	13. Preliminary Amendment				
b. Copy from a	a prior application (37 CFR 1.63 (d)) ation/divisional with Box 18 completed)	14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)				
i. DELETION OF INVENTOR(S)  15. Certified Copy of Priority Document(s)						
	stement attached deleting inventor(s) the prior application, see 37 CFR	16. Nonpublication Request under 35 U.S.C. 122				
1.63(d)(2) and 1.33(b). (b)(2)(B)(l). Applicant must attach form PTO/SB/35 or its equivalent.						
6. Application Data Sheet. See 37 CFR 1.78						
	18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment,					
or in an Application Data Sh	get under 37 CFR 1.76:  Divisional Continuation-in-part (Ci	P) of prior application No.:				
Prior application information:	Exeminer Communicative Particol	Group Art Unit:				
For CONTINUATION OR DIVIS	IONAL APPS only: The entire disclosure of	f the prior application, from which an oath or declaration is supplied under tinuation or divisional application and is hereby incorporated by reference.				
The incorporation can only be	relied upon when a portion has been inac	vertently omitted from the submitted application parts.				
19. CORRESPONDENCE ADDRESS						
Customer Number or Ber C	ode Label	or Correspondence address below				
Name	Solomon ZAR	OMB				
Address	95 706 William					
City	Hinodale	State IL Zip Code 60521				
Country	U.S. A. 17	elephone 630-654-2169 Fax 630-936-374				
Name (Print/Type)	Solomon ZARO	MB Registration No. (Attorney/Agent) 2.8,571				
Signature	Solomon Zan	Date (10/81)				

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Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

Payment Enclosed:

1. BASIC FILING FEE

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101 710 201 355 Utility filing fee

106 320 206 160 Design filing fee

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\*\*or number previously paid, if greater; For Reissues, see above

Fee Description

Deposit

Account Name

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 FEE TRANSMITTAL

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Fee Paid

## PTO/SB/17 (11-00) Approved for use through 10/31/2002. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known **Application Number** Filing Date Stetler First Named Inventor **Examiner Name Group Art Unit** Attorney Docket No. FEE CALCULATION (continued) 3. ADDITIONAL FEES Small Entity Entity Fee Fee Fee Code (\$) Code Fee (\$) Fee Description Fee Paid 130 205 65 Surcharge - late filing fee or oath Surcharge - late provisional filing fee or cover sheet 127 50 227 25 139 130 139 130 Non-English specification 147 2,520 147 2,520 For filing a request for ex parte reexamination Requesting publication of SIR prior to Examiner action 112 920\* 112 920\* 113 1,840\* 113 1,840\* Requesting publication of SIR after Examiner action 115 110 215 55 Extension for reply within first month 118 390 216 195 Extension for reply within second month 117 890 217 445 Extension for reply within third month 118 1,390 218 695 Extension for reply within fourth month 128 1,890 228 945 Extension for reply within fifth month

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SUBTOTAL (3)

107 490 207 245 Plant filing fee	118	310	219	100	Notice of Appeal	1
108 710 208 355 Reissue filing fee	120	310	220	155	Filing a brief in support of an appeal	
114 150 214 75 Provisional filing fee	121	270	221	135	Request for oral hearing	
27	138	1,510	138	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 355,-	140	110	240	55	Petition to revive - unavoidable	
2. EXTRA CLAIM FEES	141	1,240	241	620	Petition to revive - unintentional	
Extra Claims below Fee Paid	142	1,240	242	820	Utility issue fee (or reissue)	
Fotal Claims 24 -20** = 4 x 4 = 5.	143	440	243	220	Design Issue fee	
independent 2 - 3** = X = 0	144	600	244	300	Plant issue fee	<b></b>
Multiple Dependent   ■ U	122	130	122	130	Petitions to the Commissioner	
	123	50	123	50	Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity Fee Fee Fee Fee Fee Description	126	180	126	180	Submission of Information Disclosure Stmt	
Code (\$) Code (\$) 103 18 203 9 Ciskms in excess of 20	581	40	581	40	Recording each patent assignment per property (times number of properties)	
102 80 202 40 Independent claims in excess of 3 104 270 204 135 Multiple dependent claim. If not paid	146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))	
104 270 204 135 Multiple dependent claim, if not paid  109 80 209 40 ** Reissue independent claims over original patent	149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))	
110 18 210 9 ** Reissue claims in excess of 20	179	710	279	355	Request for Continued Examination (RCE)	
and over original patent	169	900	169	900	Request for expedited examination of a design application	
SUBTOTAL (2) (5) 81,-	Othe	r fee (s	pecify)	)	or a aceign approaces:	
SUBILITING (A)   (*/ U),			•			

SUBMITTED BY Complete (# applicable)						(applicable)
Name (Print/Type)	Solomon .	Zaromb	Registration No. (Attorney/Agent)	28,571	Telephone	630-654-2109
Signature	Solomon	Zaron	S.		Date	6/10/01

\*Reduced by Basic Filing Fee Paid

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